

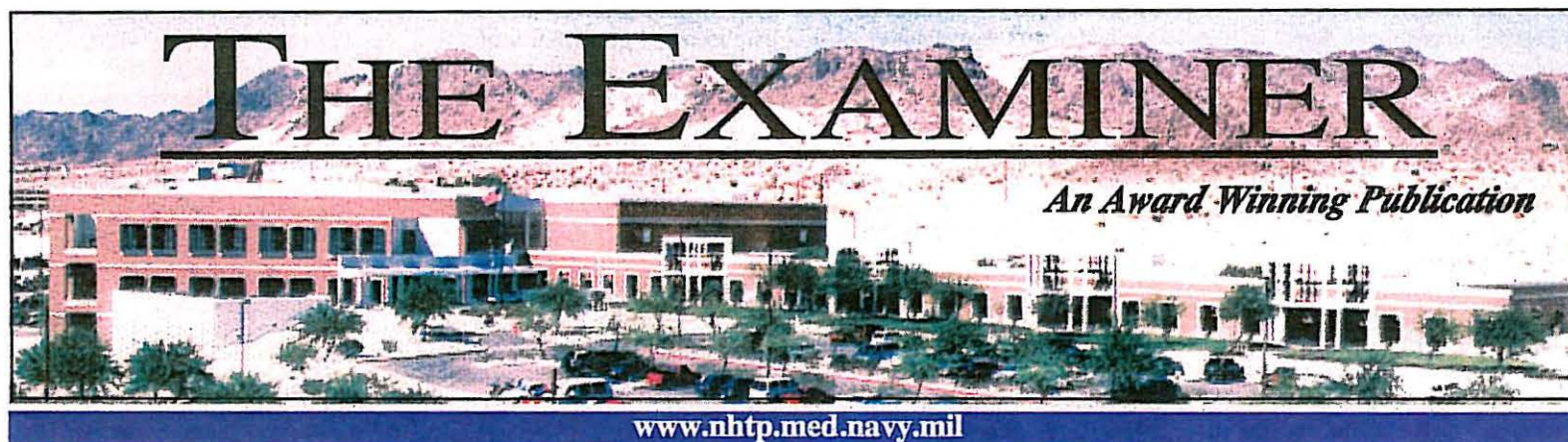
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Navy Seabees

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www.nhttp.med.navy.mil

Introducing Master Chief Kevin Hughes

By Dan Barber, Public Affairs Officer
Robert E. Bush Naval Hospital

The Robert E. Bush Naval Hospital has its newest Command Master Chief on board.

HCMC Kevin Hughes has been seen around the Command Suite and roaming the halls of the hospital since the last week of February, however, he officially takes on the job as the Senior Enlisted advisor of the hospital on Friday, March 7th.

Hughes hails from Newark, New Jersey where he grew up and attended Vailsburg High School before entering the Navy in February 1981. He went to Boot Camp at the Recruit Training Center Great Lakes and then attended advanced training at the Hospital Corps "A" School, also at Great Lakes Illinois.

Master Chief Hughes earned a Bachelors of Science with emphasis in Finance from Chapman University in 1994.

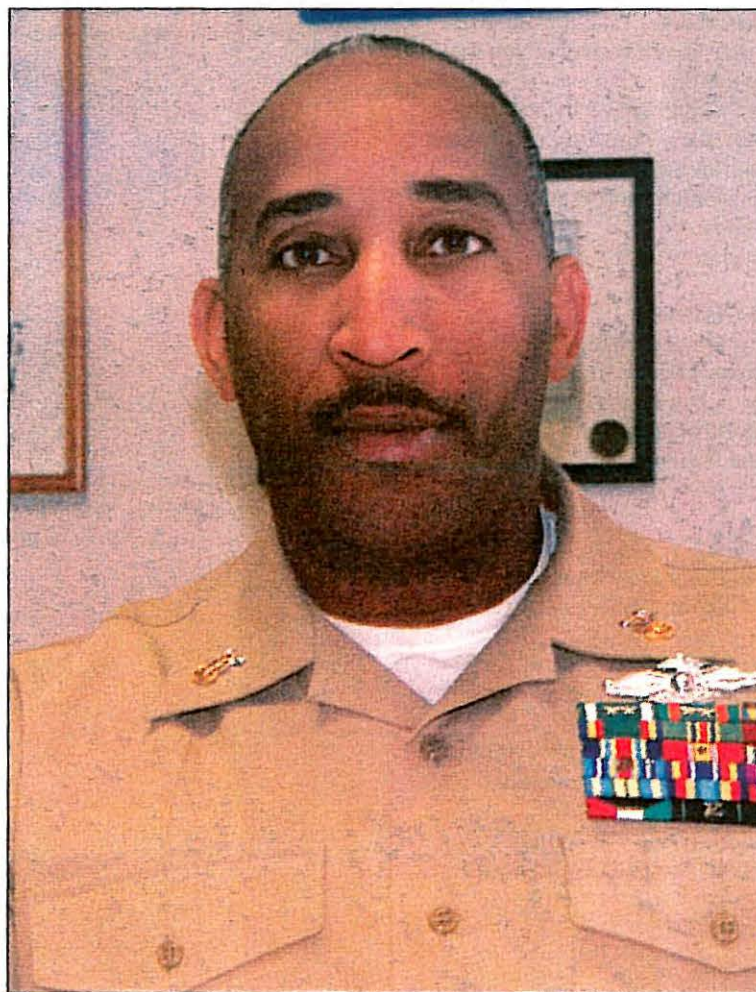
The command's newest CMC joined the Navy with the urging of family and friends, "My best friend joined three years earlier, so I followed," said Hughes.

Since his Navy career started Hughes stated that his most memorable experience to date has been his assignment with I Marine Expeditionary Force, "That assignment was by far my hardest and most memorable tour yet," said Hughes.

According to the new Command Master Chief his leadership philosophy is, "I believe that leadership earns respect by setting the example and honors two-way communications. My goal is to facilitate the potential in our Sailors that creates a committed team effort toward a shared vision, maintaining integrity and continual follow-through efforts."

When not busy with his work, the Master Chief enjoys landscaping and working on home projects, bicycling and basket ball.

Master Chief Hughes and his wife, Andrea, have three children, Joseph, 28 Tashia, 23 and Khalil, 13.



Inside...

According to the Centers for Disease Control and Prevention (CDC), a traumatic brain injury (TBI) is defined as a blow or jolt to the head or a penetrating head injury that disrupts the function of the brain. *page 2*

Service members and their families can meet deployment-related challenges and transitions through resources available from TRICARE, the Military Health System and TriWest Healthcare Alliance. *page 3*

A new Command Ombudsman was recently appointed to represent the family members of the Robert E. Bush Naval Hospital. *page 3*

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March Is Traumatic Brain Injury Awareness Month

By Martha Hunt, MA
Health Promotions Coordinator
Robert E. Bush Naval Hospital

What is a traumatic brain injury?

According to the Centers for Disease Control and Prevention (CDC), a traumatic brain injury (TBI) is defined as a blow or jolt to the head or a penetrating head injury that disrupts the function of the brain. Not all blows or jolts to the head result in a TBI. The severity of such an injury

may range from "mild," i.e., a brief change in mental status or consciousness to "severe," i.e., an extended period of unconsciousness or amnesia after the injury. A TBI can result in short or long-term problems with independent function.

How many people have TBI?

Of the 1.4 million who sustain a TBI each year in the United States: 50,000 die; 235,000 are hospitalized; and 1.1 million are treated and released from an emergency department. The number of people with TBI who are not seen in an emergency department or who receive no

care is unknown.

What causes TBI?

The leading causes of TBI are: Falls (28 percent); Motor vehicle-traffic crashes (20 percent); Struck by/against events (19 percent); and Assaults (11 percent). Blasts are a leading cause of TBI for active duty military personnel in war zones.

Who is at highest risk for TBI?

Males are about 1.5 times as likely as females to sustain a TBI. The two age groups at highest risk for TBI are 0 to 4 year old's and 15 to 19 year old's. Certain military duties (e.g., paratrooper) increase the risk of sustaining a TBI. African Americans have the highest

death rate from TBI.

What are the costs of TBI?

Direct medical costs and indirect costs such as lost productivity of TBI totaled an estimated \$60 billion in the United States in 2000.

What are the long-term consequences of TBI?

The Centers for Disease Control and Prevention estimates that at least 5.3 million Americans currently have a long-term or lifelong need for help to perform activities of daily living as a result of a TBI. According to one study, about 40 percent of those hospitalized with a TBI had at least one unmet need for services one year after their injury.

The most frequent unmet

needs were: Improving memory and problem solving; Managing stress and emotional upsets; controlling one's temper; and improving one's job skills. TBI can cause a wide range of functional changes affecting thinking, language, learning, emotions, behavior, and/or sensation. It can also cause epilepsy and increase the risk for conditions such as Alzheimer's disease, Parkinson's disease, and other brain disorders that become more prevalent with age.

The information provided above from the CDC as well as other helpful information can be found at Brain Injury Association of America at www.biausa.org/.

Get Strong for Your Baby

TRICARE Tips for Expecting Moms

By Shari Lopatin
TriWest Healthcare Alliance

With Mother's Day approaching, many women find themselves smiling -- some experiencing motherhood for the first time, and others ready to welcome another addition into the family.

Expecting moms have a lot to be excited about, including having a healthy child. Luckily, TRICARE covers regular doctor visits during pregnancy as part of its maternity health coverage. Take this chance talk to your doctor or obstetrician about any health concerns you may have, as well as any medications you are taking.

Although following proper prenatal care as prescribed by a doctor or obstetrician helps to ensure a smooth pregnancy, expecting moms can take additional precautions to avoid a condition called gestational diabetes that affects about 135,000 pregnant women each year, according to the American Diabetes Association (ADA).

Fortunately, moms can do many things to prevent it.

What is Gestational Diabetes?

The ADA defines gestational diabetes as temporary high blood sugar (glucose) levels that develop in approximately four percent of American women late in their pregnancy. A baby with increased glucose levels may gain too much weight in vitro, along with an increased chance of childhood obesity and higher risk of developing type 2 diabetes as an adult.

Get a game plan

Whether you're pregnant or preparing to become pregnant, take these tips from TRICARE.mil to stay healthy and deter gestational diabetes:

- * Belly-up to fiber. Women who eat fiber-rich foods such as dark breads, fruit and certain cereals before becoming pregnant are less likely to form gestational diabetes.

- * Eat smart. Eat a healthy diet and start taking a daily multivitamin with 0.4mg of folic acid to reduce the chances of having a child with birth defects.

- * Cut it out. Cut down on caffeine, avoid tobacco smoke, and stay away from alcohol while you're pregnant, all of which could harm your baby.

Continued on page 7

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The Examiner welcomes your comments and suggestions concerning the publication. Deadline for submission of articles is the 15th of each month for the following month's edition. Any format is welcome, however, the preferred method of submission is by e-mail or by computer disk.

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Deployment: Tips for Less Stress

By Brian P. Smith
TriWest Healthcare Alliance

Service members and their families can meet deployment-related challenges and transitions through resources available from TRICARE, the Military Health System and TriWest Healthcare Alliance.

TRICARE Coverage for Behavioral Health Care

TRICARE Prime beneficiaries do not need a referral for the first eight routine outpatient behavioral health visits per fiscal year (October 1 to September 30) for most categories of behavioral health providers. Avoid point-of-service charges by receiving care from a TRICARE-network provider.

Active duty Service members (ADSM) must have a referral from their primary care manager (PCM) for all behavioral health care.

Family members using TRICARE Standard or Extra, as well as Reserve Component members and family members enrolled in TRICARE Reserve Select (TRS), will be responsible for the annual deductible as well as applicable cost-shares associated with receiving care. For most categories of clinical behavioral health providers, no referrals are necessary under TRICARE Standard, Extra or TRS. After the initial eight outpatient visits each fiscal year, prior authorization from TriWest will be required. The behavioral health provider is responsible for requesting additional visits when medically necessary.

Certain categories of behavioral health providers (pastoral counselors, mental health counselors and licensed professional counselors) will always require a referral, even for the first eight visits.

TriWest's "Help From Home" Behavioral Health Resources

* The Behavioral Health Portal on www.triwest.com provides links to local and national resources as well as information on PTSD, depression, stress, substance use, family issues and more

* An online post-deployment support video series is available on www.triwest.com. The Help From Home video series includes Getting Home--All the Way Home, where behavioral health experts -- veterans themselves -- discuss common symptoms of combat stress and the importance of early detection and treatment and On the Homefront, featuring military families who have faced the challenges of deployment and reintegration offering practical advice for families of military Service members. Beneficiaries, providers, military leaders and family support organizations throughout TRICARE's 21-state West Region may order a complimentary 2-DVD set.

* Personalized depression support and education from a clinical health coach for eligible beneficiaries through TriWest's Condition (Disease) Management program

* Continuing education to help civilian health care providers in TRICARE's West Region identify and treat symptoms of combat stress or PTSD

* Annual sponsorship of Operation Purple summer camps for the children of deployed Service members and Wounded Warriors

* A toll-free Behavioral Health Crisis Line (1-866-284-3743), recently certified by the American Association of Suicidology, staffed 24/7 by trained clinicians, providing non-emergency behavioral health assistance to West Region beneficiaries

* A Behavioral Health Provider Locator and Appointment Assistance Service number (1-866-651-4970) available from 8 a.m. to 6 p.m. in all West Region time zones to help Prime-enrolled active duty family members find local behavioral health care providers and set appointments; active duty Service members must have a referral from their PCM before making an appointment

Note: The Appointment Assistance Service is not a help line for treatment, counseling or advice. TRICARE beneficiaries seeking emergency behavioral health assistance should call 911, proceed to the nearest emergency room for treatment or call TriWest's Crisis Line.

For an overview of these benefits, visit the "Beneficiary Services" section on www.triwest.com then select Handbooks and Brochures and "Behavioral Health Care Benefits" to view a printable brochure.

Continued on page 7

Hospital Names New Ombudsman

By Dan Barber, Public Affairs Officer
Robert E. Bush Naval Hospital

A new Command Ombudsman was recently appointed to represent the family members of the Robert E. Bush Naval Hospital.

Taking over the Ombudsman duties from Tiffany Niles is Lacy Richey, wife of HMC Joseph Richey.

Several years ago the Navy borrowed the concept of an Ombudsman program from the Scandinavian countries where an Ombudsman is a person charged with investigating citizens' complaints against the government.

In the Navy, an Ombudsman serves as a bridge between the command and its families working as a liaison or link... to be a source of information and referral.

The Command Ombudsmen are fully supported by the Commanding Officer, and are always kept informed about command activities, therefore if the command had an emergency, the Ombudsmen would be made aware of any information they could share with families.

The Ms. Richey was sent to Ombudsman Training in San Diego which provided her with all the information she needs to better serve our family members and this command.

Spouses may call the Ombudsmen to get accurate answers to a variety of questions, or be referred to a source for help.

The Command Ombudsmen interacts with organizations such as Family Service Centers, Chaplain's offices, Navy-Marine Corps Relief Society, the American Red



Cross and many more... so they know where to go to get professional assistance.

The Command Ombudsman can be reached by pager at 800-238-5852.

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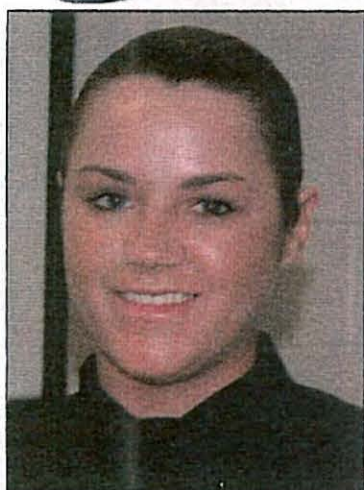
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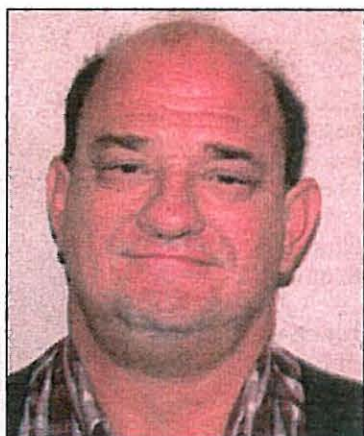
HM3 Erica Alliano, Patient Admin, receives a gold star in lieu of second award of the Navy and Marine Corps Achievement Medal.



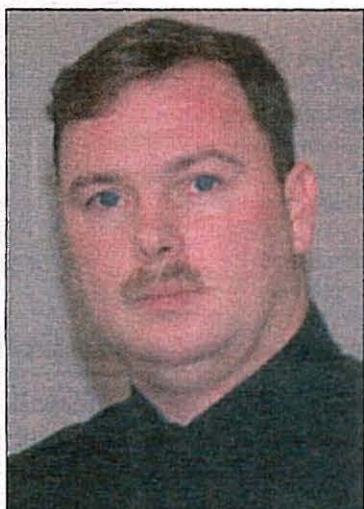
HM2 Zachary Boles, Physical Therapy receives a Navy Ball Letter of Appreciation.



Lieutenant Earl Chow, Facilities Management, receives the Department Safety Award for 2007.



William "Bill" Williams, Facilities Department, receives the Individual Safety Award for 2007.



HM2 Jeffery Hunter, Preventive Medicine Department, receives a Navy Ball Letter of Appreciation. Also at the same awards ceremony Hunter was awarded a gold star in lieu of a fourth award of a Navy and Marine Corps Achievement Medal.



HM3 Christopher Ike, Education and Training, receives a Navy Ball Letter of Appreciation.



HM3 Jeffery Hunter, Preventive Medicine, above, take the oath during his recent reenlistment ceremony.



Lieutenant Commander Audrey Bolanowski, a surgeon in the General Surgery Clinic takes the oath at her recent promotion ceremony.



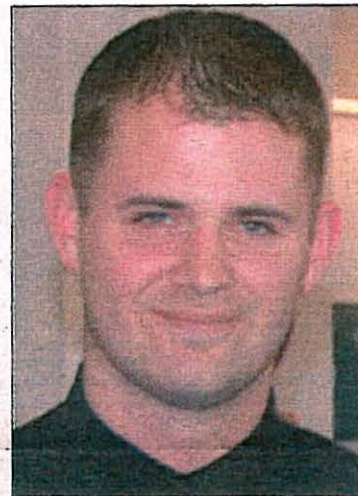
HMI Daniel Magee, Preventive Medicine, receives a Navy Ball Letter of Appreciation.



Lt.j.g. Sarah "Beth" Bishop, Health Care Operations, reluctantly gave up the "Bull" at a recent "Passing of the Bull" ceremony.



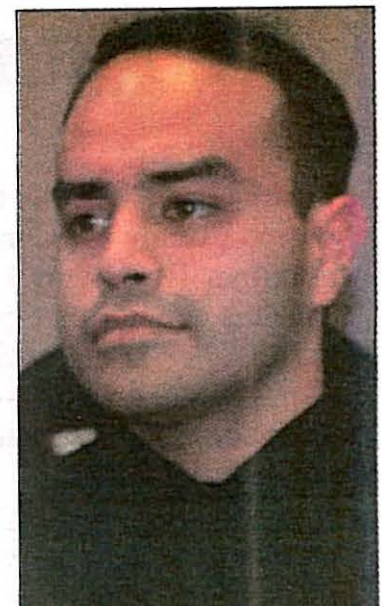
HM2 Maria Morales, Pharmacy, receives a Navy Ball Letter of Appreciation.



HM3 Jarrod Moran, Primary Care Clinic, receives a Navy and Marine Corps Achievement Medal.



HM3 Ryan Noyes is frocked to his current rank.



CS3 Martin Ortega, Nutrition Management Department receives a Navy Ball Letter of Appreciation.



HMCS Alex Olazo, Senior Enlisted Advisor for Director Nursing Services and Manpower Chief, receives a gold star in lieu of second award of the Navy and Marine Corps Achievement Medal.



HM3 Erica Somerville, Finance Department, receives a Navy Ball Letter of Appreciation.

Continued on page 8



Lieutenant Junior Grade Sarah "Beth" Bishop, of Health Care Ops, and Lieutenant Junior Grade Macedonio Herrera, Head, Material Management, take the oath at their recent promotion ceremony to their current rank, as family members look on.

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Celebrating Women's History Month with Pride

"Humans are allergic to change. They love to say, 'We've always done it this way.' I try to fight that. That's why I have a clock on my wall that runs counter-clockwise."

-- ADM Grace Murray Hopper

By SKI (AW/SW) Kimberley S. Blain-Sweet
Public Affairs Assistant
Robert E. Bush Naval Hospital

I have always wondered what people back in time would say if they could see the world today. There may be more violence and misunderstandings, but there have been several changes that have been for the good. The inclusion of all peoples regardless of gender or ethnic backgrounds have helped move the world as a whole forward and tap into an entire new realm of thinking and creating new and diverse things.

On a personal note, not to long ago, while I was at the Navy Exchange in my dress blues, an older veteran stopped me at the barber shop and we spoke for a few. Are you a WAVE he asked? Knowing a bit about World War II history I smiled to myself and responded that I was not a WAVE, but I was an active duty sailor. He looked at me in awe and I started to feel a little embarrassed. Why you ask, well it was one of those looks that held an incredulous tone. He then said, well I have never seen a WAVE with that many decorations and then asked if I had been on a ship. I responded

that I had and he just shook my hand and said, Thank you for your service.

While I was thinking about what I was going to write when in came to Women's History Month I automatically thought of this story and I started to think of all the changes that have been made since woman gain the right to vote August 26 1920 after many years women participation in the suffrage movement (which means women's struggle for the right to vote.)

During World War I, women were working in the war factories supporting the cause and yet they were still not able to vote. By this time the suffrage movement had been going on since summer 1848 and it was at that time that it became clear to politicians that if it were not for the support of the women in the various industries of war time America, then they may not have been able to support the war effort while the men were away fighting.

By the time World War II had started, women were allowed to

vote, but women were still not allowed to serve alongside men in active duty status. The Army and the Navy had Nurse Corps and that was the extent of women in military uniform. It was not until the realization that America would be fighting a two front war is when congress reconsidered its original position regarding women on active duty and they allowed females to serve in clerical and support

positions opening males, previously in these positions, to assignments in forward deployed positions.

Even after all the work that women did during World War II, many of them were asked to resign their positions after the war ended and returned to civilian life, but in June 1948 the Women's Armed Services Integration Act allowed women to serve as permanent of the

Armed forces though it later excluded women that have children under the age of 18, but was later changed in the 1970's and allowed women with dependents to serve.

As integral members of the Armed Services, women have contributed long and honorable service to military service. US census reports that as of 2003, there were over 212,000 women serving on active duty.



High School students from local community high schools who participated at the annual Job Shadow Day are from left to right, Casey Claire, Kenneth 'Kenny' Foster, Tionna Edwards, Breann Badders, Corinna Phouvankham, Crystal Bennett, Steven Prather, Malorie Barger, Brandy Hayes and Tim Thompson.

Job Shadow Day Once Again a Success

By SKI (AW/SW) Kimberly Blain-Sweet
Public Affairs Assistant
Robert E. Bush Naval Hospital

Last month, the Robert E. Bush Naval Hospital hosted ten students from area High Schools for the Marine Corps Air ground Combat Center Job Shadow Day.

This event allows students in the area to visit various job industries located on the Combat Center and shadow individuals that perform in the job in which they are interested.

With quite a few students were fascinated by the Medical Field, they were given the opportunity to ask questions and see some of the things they may be exposed to if they were to venture into that field.

Lt. Cmdr. D. Sol, Lt. Cmdr. F Slonski, Lt. Cmdr. B. Schwartz, LT L. Jensen, Lt. M. Mero, Lt. R Archambault, Ensign G. Abernathy, and Ensign C.

Castro were gracious enough to contribute their time and escort these students around various departments located throughout the hospital and answer their questions.

Casey Claire, interested in the pharmacy field, was very impressed by what he was exposed to on his visit and stated "[This is what] I want to do. This visit has made me want to do this even more."

Students Steven Prather, Malorie Barger, Tionna Edwards, Kenneth 'Kenny' Foster and Brandy Hayes all had the opportunity to see an actual surgery in progress. When asked what she like the most, Brandy Hayes said "All the things. It was so real. Different from T.V."

Tionna Edwards exclaimed, "I just want to be a Pediatrician. Kids are my life. The things that I have been through as a young adult are crazy. I do not want other people to go through the same."

This event occurs annually and is offered to area high school students.

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TRICARE Prime for New Families

By Nicole Krug
TriWest Healthcare Alliance

If you're expecting a new addition to your family this year, you have a lot to think about and probably more than a few questions. Getting TRICARE Prime or Prime Remote coverage for your new child is one of the important things you should be thinking about, and now it's easier than ever!

Whether welcoming a newborn or adopting, it pays for parents to understand how to get TRICARE Prime coverage for their child. If all of your bases aren't covered, you may receive unexpected bills for out-of-pocket fees.

New parents have 60 days from the date of birth or adoption to enroll their child into TRICARE Prime. On the 61st day, a child not enrolled in Prime will automatically be covered by TRICARE Standard.

You can still enroll your child in Prime, but the 20th of the month rule will apply. This means that if a completed application for Prime enrollment is received by TriWest on or before the 20th of the month, Prime benefits will go into effect on the 1st of the next month. If TriWest receives the application after the 20th of the month, the Prime enrollment will be effective on the 1st of the following month.

By taking a couple of baby steps within the first 60 days, you can keep your child's Prime coverage continuous:

1. DEERS (Defense Enrollment Eligibility Reporting System) -- The first step is to add the child into DEERS. This must be done at a DEERS ID site. You may contact DEERS at 1-800-538-9552 to obtain the location of the ID Site nearest to you. An Application for Uniformed Services Identification Card and DEERS Enrollment Form (DD Form 1172) must be signed at the DEERS ID site by the sponsor. This form may be downloaded from www.triwest.com on the "Birth or Adoption" page of the "Life Changing Events" section.

Additional documentation is required such as a birth certificate. For more specific information, please contact DEERS at 1-800-538-9552.

2. TRICARE Prime Enrollment -- Once the child is enrolled in DEERS, he or she can be enrolled in Prime. You may now enroll your child online at TRICARE's Beneficiary Web Enrollment (BWE) site. Go to www.triwest.com and click the "Enrollment" link on the left-hand side under "Quick Links" to find the link to the BWE site, where you can enroll your child. You may also choose to download a TRICARE Prime Enrollment Application and PCM Change Form (DD Form 2876) found on the same page on www.triwest.com.

Both forms require you to identify your first and second preference for a Primary Care Manager (PCM), since the final PCM assignment is dependent upon provider availability and local Military Treatment Facility (MTF) policy.

If you are an Active Duty Family Member (ADFM) who would like to receive medical care from an MTF PCM, you should contact your TRICARE Service Center (TSC) before submitting your enrollment application. MTF provider assignments are coordinated at your MTF or through the local TSC. MTF providers are not listed in the online Provider Directory.

If you are mailing your forms, be sure to sign the form in either blue or black ink. Forms that are not signed and dated are considered incomplete and will be returned, delaying the enrollment process. Completed forms should be mailed to:

TriWest Healthcare Alliance
P.O. Box 41520
Phoenix, AZ 85080-1520

For questions or more information on how to enroll your new child, visit "Life Changing Events" in the Beneficiary section of www.triwest.com. As a registered user, you'll get the latest TRICARE news about new services or changes that affect their benefits. West Region TRICARE beneficiaries may also call 1-888-TRIWEST (873-9378) for more information.

Tips for Less Stress...

Continued from page 3

Visit the "Mental Health and Behavior" section at www.tricare.mil for specific coverage and associated costs.

TriWest recognizes the ongoing sacrifices of the military community and is committed to doing "Whatever It Takes" to assist Service members and their families. For further assistance, please contact TriWest at 1-888-TRIWEST (874-9378).

Mental Health Self-Assessment Program

Members of the military can anonymously take a voluntary self-assessment test online; the Mental Health Self-Assessment Program contains assessments for mental health and alcohol use for Service members and their families affected by deployment. It's offered online at www.militarymentalhealth.org and over the phone at 1-877-877-3647, 24-hours a day, seven days a week. A series of guided questions (from Screening for Mental Health, Inc.) will help the beneficiary discover if there are symptoms that may benefit from treatment or further evaluation.

Get Strong for Your Baby...

Continued from page 2

After the baby

Once that healthy bundle arrives, remember to update your family information in the Defense Enrollment Eligibility Reporting System (DEERS). Keep in mind, if you don't add your new child into DEERS within the first year, DEERS will show "loss of eligibility," and the child will no longer be able to receive any TRICARE benefits. See the "Life Changing Events" section of www.triwest.com under the "beneficiary" section for more information.

The next step is to enroll your newborn in TRICARE Prime. New parents have 60 days from the date of birth (or adoption) to enroll their child into TRICARE Prime. After 60 days, claims will process as TRICARE Standard or Extra, with associated deductibles and cost-shares. You can visit TRICARE's Beneficiary Web Enrollment site to enroll in TRICARE Prime online:

<https://www.dmdc.osd.mil/appj/bwe/indexAction.do>

Best of all, you can always refer to www.TRICARE.mil or your TRICARE Prime handbook available on www.triwest.com for an overview of covered benefits and a suggested immunization schedule for children in TriWest's Healthy Living Portal.

March Smoking Cessation Class Schedule

Kick the habit and learn to become tobacco free! The Robert E. Bush Naval Hospital Health Promotions Program offers tobacco cessation classes in the hospital.

Classes are offered at two convenient times of noon and 5:30 p.m. The next set of tobacco cessation classes will start March 25.

The health promotions coordinator will be TAD until Monday the 24th of March so please wait until the 24th to enroll in the class. To sign up, call Health Promotions at 830-2814. Thank you.

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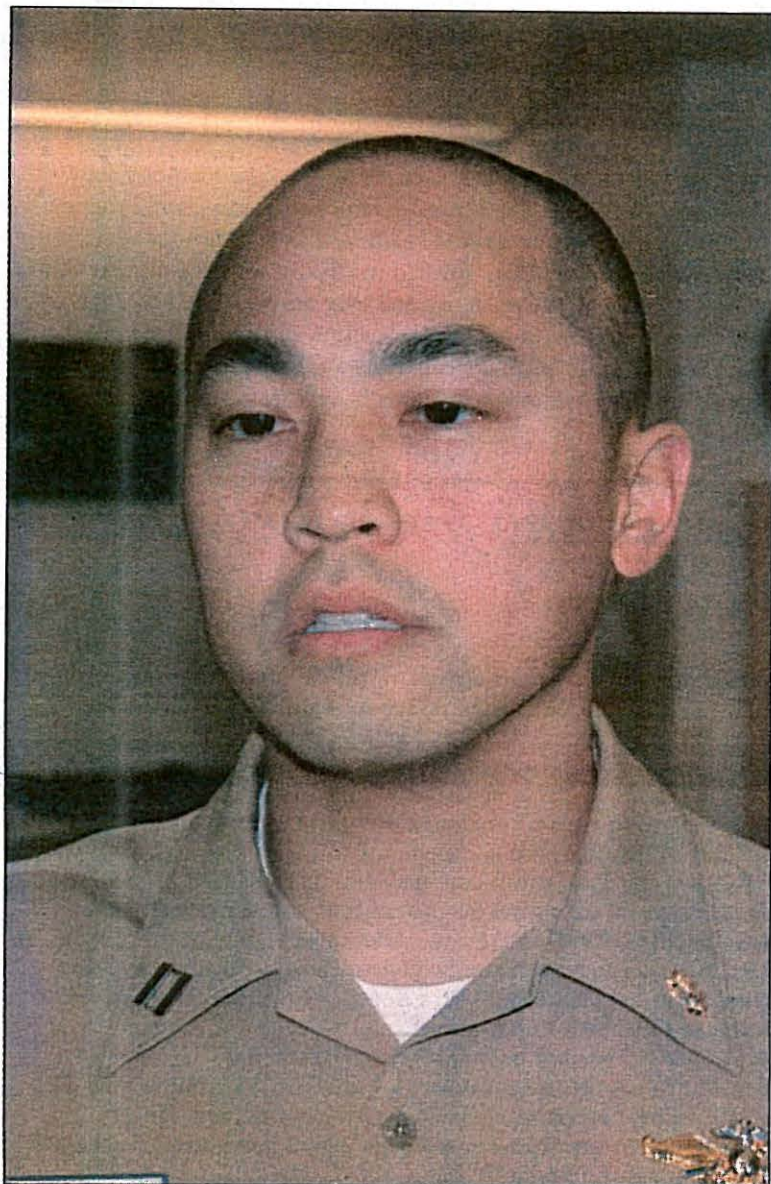
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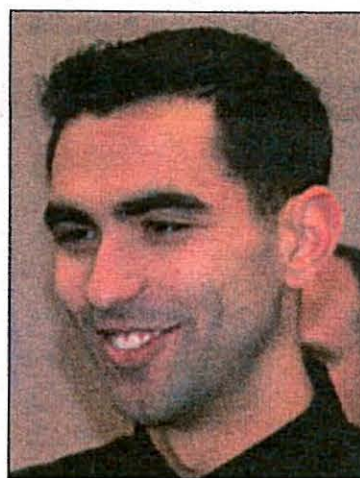
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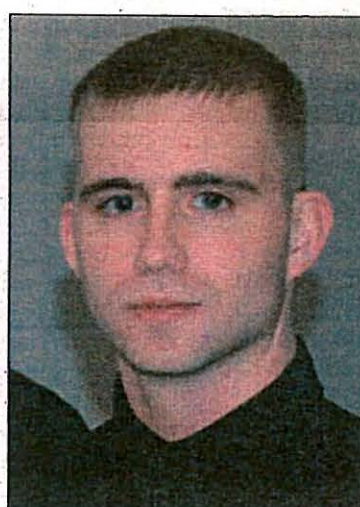
Lieutenant Commander Steven Park, a physician in the Internal Medicine Department, takes the oath at his recent promotion ceremony.



Ensign Steven Starr, Multi-Service Ward, is named the newest Bull Ensign for the Robert E. Bush Naval Hospital.



HM3 Cody Thornton, Laboratory Department, receives a Navy Ball Letter of Appreciation.



HM3 Andrew Wagner, Primary Care Clinic, receives a Navy Ball Letter of Appreciation.



Loribet Wright receives a Federal Length of Service Award (five years).

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